

TACTICAL RESPONSE REPORT/Chicago Police Department

MEMBER INVOLVED		1. DATE OF INCIDENT 29-SEP-2011		TIME 22:29:00		2. ADDRESS OF OCCURRENCE		3. LOCATION CODE 090		4. BEAT/OCCUR 2432																																																																											
		5. POSITION 9161		6. LAST NAME BIELEMA		7. FIRST NAME JOSHUA C		8. STAR NO 9234		9. SEX <input checked="" type="checkbox"/> 01 M <input type="checkbox"/> 02 F																																																																											
SUBJECT INFORMATION		14. DATE OF APPT 23-JAN-2006		15. EMPLOYEE NO.		16. UNIT & BEAT OF ASSIGNMENT 024 2406A		17. DUTY STATUS <input checked="" type="checkbox"/> 01 On <input type="checkbox"/> 02 Off		18. MEMBER INJURED? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No																																																																											
		19. MEMBER IN UNIFORM? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No		20. LAST NAME		21. FIRST NAME		22. M.I.		23. SEX <input checked="" type="checkbox"/> 01 M <input type="checkbox"/> 02 F																																																																											
REASON FOR USE OF FORCE (Check all that apply)		28. ADDRESS IL 60628		29. TELEPHONE NO.		30. WAS SUBJECT ARMED? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No		31. SUBJECT INJURED? <input checked="" type="checkbox"/> 01 Yes <input type="checkbox"/> 02 No		32. SUBJECT ALLEGED INJURY? <input checked="" type="checkbox"/> 01 Yes <input type="checkbox"/> 02 No																																																																											
		33. WHERE WAS MEDICAL TREATMENT OBTAINED? ST FRANCIS		34. BY WHOM? KENTER		35. CONDITION <input type="checkbox"/> 03 Hospitalized <input checked="" type="checkbox"/> 04 Not Hospitalized		36. APPARENTLY NORMAL <input type="checkbox"/> 01 Apparently Normal <input type="checkbox"/> 02 Under Influence		37. CB NO. <input type="checkbox"/> DNA																																																																											
WEAPON DISCHARGE INCIDENT		38. CHARGES PLACED ***** PLEASE SEE NEXT PAGE *****																																																																																			
		39. <input type="checkbox"/> DNA																																																																																			
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SIGNATURES		72. NOTIFICATIONS (OC OR TASER INCIDENT): <input checked="" type="checkbox"/> OEMC <input checked="" type="checkbox"/> DESK SGT. & W.C./DIST. OF OCCUR. NOTIFICATIONS (FIREARM INCIDENT): <input type="checkbox"/> OEMC <input type="checkbox"/> DESK SGT. & W.C./DIST. OF OCCUR. <input type="checkbox"/> OP COMMAND <input type="checkbox"/> DET. DIV. Members will ensure that all required notifications and all witnesses to this use of force are documented in the appropriate case report.																																																																																			
		73. REPORTING MEMBER (Print Name) BIELEMA, JOSHUA C STAR/EMPLOYEE NO. 9234 SIGNATURE _____ 29-SEP-2011 23:44:24 Reviewing supervisor will ensure the legibility and completeness of this report and attest by entering the required information below.																																																																																			
SIGNATURES		74. REVIEWING SUPERVISOR (Print Name) RELLINGER, SHAWN A STAR NO. 1141 SIGNATURE _____ DATE REVIEWED 29-SEP-2011 23:45:07 TIME																																																																																			

CPD-11.377 (REV. 10/07)

LOG # 1051321

Attachment # 7

CPD 0026607

SUBJECT
INFORMATION

36. CHARGES PLACED

☐ DNA

720 ILCS 5.0/12-3.2-A-1, 720 ILCS 5.0/31-1-A, 720 ILCS 5.0/31-1-A, 720 ILCS
5.0/12-3.3-A, 720 ILCS 5.0/12-3.05-D-4

WATCH COMMANDER/OCIC REVIEW

THE WATCH COMMANDER WILL COMPLETE THE REVIEW SECTION FOR 1.) ALL INCIDENTS THAT DID NOT INVOLVE THE DISCHARGE OF A FIREARM; 2.) FIREARM DISCHARGE INCIDENTS INVOLVING THE DESTRUCTION OF AN ANIMAL OR, 3.) ACCIDENTAL DISCHARGE OF A FIREARM NOT RESULTING IN AN INJURY TO ANY PERSON.

THE ADS WILL COMPLETE THE REVIEW SECTION FOR ALL INCIDENTS INVOLVING: 1.) THE DISCHARGE OF A FIREARM OR IMPACT MUNITIONS BY OR AT A DEPARTMENT MEMBER EXCEPT FOR AN ANIMAL DESTRUCTION OR AN ACCIDENTAL DISCHARGE THAT DOES NOT RESULT IN AN INJURY TO ANY PERSON, 2.) MEMBER'S USE OF FORCE BY WHATEVER MEANS THAT RESULTS IN THE DEATH OF A PERSON; 3.) ANY LESSER USE OF FORCE BY A DEPARTMENT MEMBER WHEN THAT USE OF FORCE STEMS FROM THE SAME INCIDENT DESCRIBED HERE IN 1 OR 2.

75. SUBJECT'S STATEMENT REGARDING THE USE OF FORCE

☐ DNA

☐ REFUSED

☒ UNABLE TO INTERVIEW (Specify Reason)

Currently at St. Francis Hospital for examination.

76. WATCH COMMANDER/OCIC RATIONALE FOR BOX 77 FINDING

The actions of the officer in this instance were prudent, professional and within Department guidelines.

77. WATCH COMMANDER/OCIC FINDING BASED UPON CURRENTLY AVAILABLE INFORMATION:

☒ I HAVE CONCLUDED THAT THE MEMBER'S ACTIONS WERE IN COMPLIANCE WITH DEPARTMENT PROCEDURES AND DIRECTIVES.

☐ I HAVE CONCLUDED THAT FURTHER INVESTIGATION IS REQUIRED.

LOG NO./CRNO. _____ OBTAINED

78. WATCH COMMANDER/OCIC (Print Name)

SCHEITHAUER, MARK

SIGNATURE

DATE COMPLETED

TIME

29-SEP-2011 23:54:04

79. DISTRIBUTION OF ORIGINAL TRR:

A TRR PACKET, INCLUDING THE TRR AND COPIES OF THE BELOW LISTED ATTACHMENTS WILL BE FORWARDED TO THE OFFICE OF PROFESSIONAL STANDARDS.

ATTACHMENTS - PHOTOCOPIES OF:

☐ CASE REPORT
☐ ARREST REPORT

☐ SUPPLEMENTARY REPORT
☐ OFFICER BATTERY REPORT
☐ TD-FROM-SUBJECT REPORTS FROM DEPARTMENT WITNESS(ES)

☐ I.O.D. REPORT
☐ CR INITIATION REPORT

80. TOTAL TRR'S THIS EVENT No.

3